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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	William C. Phillips; Mark E. Schommer; John W. Forsberg; Alex C. Toy; David P. Olson	Confirmation No.	9345
Serial No.:	10/693,006	Customer No.:	28863
Filed:	October 24, 2003	Examiner:	Unknown
Docket No.:	1023-290US01	Group Art Unit:	3736
Title:	MEDICAL DEVICE PROGRAMMER WITH FACEPLATE		

CERTIFICATE UNDER 37 CFR 1.8: I hereby certify that this correspondence is being deposited with the United States Post Service, as First Class Mail, in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on September 6, 2005.

By: Coryl C. Harrimon
Name: Coryl C. Harrimon

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendments
Commissioner for Patents
Alexandria, VA 22313-1450

Dear Sir:

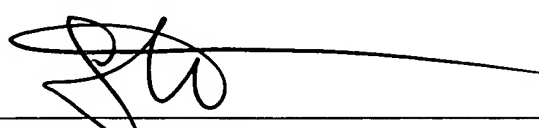
Applicant submits the references listed on the attached form PTO-1449. This statement is being filed, to the best of Applicant's knowledge, before the receipt of a first Office Action on the merits.

Applicant has enclosed a copy of each foreign document cited. Copies of the U.S. patents are not enclosed as this requirement has been waived by the U.S. Patent Office.

Respectfully submitted,

Date: 9-2-05

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Form 1449* INFORMATION DISCLOSURE STATEMENT IN AN APPLICATION (Use several sheets if necessary)	Docket Number: 1023-290US01	Application Number: 10/693,006
	Applicant: William C. Phillips; Mark E. Schommer; John W. Forsberg; Alex C. Toy; David P. Olson	
	Filing Date: October 24, 2003	Group Art Unit: 3736
	Examiner Name: Unknown	

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EXAMINER	Date Considered
<small>*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.</small>	

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		Examiner Name: Unknown			
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EXAMINER	Date Considered
*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.	
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